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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/562,460			ing Date 29/2005	To be Mailed
APPLICATION AS FILED - PART I OTHER THAN (Column 1) (Column 2) SMALL ENTITY OR SMALL ENTITY											
FOR			UMBER FI	.ED NU	MBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A	1	N/A		1	N/A	
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A	1	N/A		ı	N/A	
	EXAMINATION FE (37 CFR 1.16(a), (p),		N/A		N/A]	N/A			N/A	
TO' (37	CFR 1.16(i)		mir	us 20 = *		1	x \$ =		OR	x s =	
IND (37	EPENDENT CLAIN CFR 1.16(h))	is	minus 3 = *			1	x \$ =		1	x s =	
	APPLICATION SIZE 37 CFR 1.16(s))	FEE shee is \$2 addi	ts of pap 50 (\$125 tional 50	etion and drawin er, the application for small entity) sheets or fraction (1)(G) and 37	n size fee due for each n thereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))									ı		
* If the difference in column 1 is less than zero, enter "0" in column 2.										TOTAL	L
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY CLAMIS HIGHEST											
AMENDMENT	10/26/2010	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	· 10	Minus	 20	= 0]	x \$ =		OR	X \$52=	0
	Independent (37 CFR 1.16(h))	• 3	Minus	 3	= 0	1	x \$ =		OR	X \$220=	0
	Application Size Fee (37 CFR 1.16(s))								_		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))					ı			OR		
_							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16(i))		Minus	**	=]	x \$ =		OR	x \$ =	
Ω	Independent (37 CFR 1/16(h))	•	Minus	***	=	1	x \$ =		OR	x s =	
 	Application Size Fee (37 CFR 1.16(s))					Į			l		
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					l			OR		
TOTAL OT ADDL FEE FEE											
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 2, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 2, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1 in the appropriate box in column 1 in the paid of the paid o											

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